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PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

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**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	Not Yet Known
Filing Date	Not Yet Known
First Named Inventor	Donald L. Schilling
Title	WIRELESS TELEPHONE DEBIT CARD SYSTEM AND METHOD
Group Art Unit	Not Yet Known
Examiner Name	Not Yet Known
Attorney Docket Number	I-2-74.4US

I hereby appoint:

☒ Practitioners at Customer Number

24373

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☐ Practitioner(s) named below:

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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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<input checked="" type="checkbox"/> Firm or Individual Name	Volpe and Koenig, P.C. DEPT ICC			
Address				
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City		State		Zip
Country				
Telephone		Fax		

I am the:

☐ Applicant/Inventor.☒ Assignee of record of the entire interest as recorded at
Reel 6457/Frame 0674 of priority Patent No. 5,359,182**SIGNATURE of Applicant or Assignee of Record**

Name	Donald M. Boles, Vice President - Intellectual Property
Signature	
Date	6/14/01

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted.

DECLARATION AND POWER OF ATTORNEY

As below-named inventor, I hereby declare that: my residence, post office address, and citizenship are as stated below next to my name; that I believe I am the original, first, and sole inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

WIRELESS DEBIT CARD
SYSTEM AND METHOD

the specification filed October 6, 1992, and having serial no. 07/956,851.

I hereby state that I have reviewed and understood the contents of the above-identified application, including the claims.

I acknowledge the duty to disclose information which is material to the examination of this application, in accordance with Title 37, Code of Federal Regulations, § 1.56(a).

I hereby appoint the following attorney to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of inventor:

Donald L. Schilling

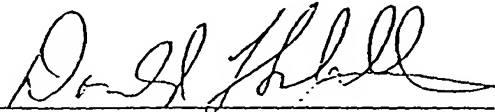
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Date: 11/17/92

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the **PATENT APPLICATION** of:

Donald L. Schilling

Application No.: Not Yet Known

Filed: Not Yet Known

For: REMOVABLE CARD FOR USE IN A
RADIO UNIT

Group: Not Yet Known

Examiner: Not Yet Known

Our File: I-2-0074.7US

Date: July 11, 2003

ASSOCIATE POWER OF ATTORNEY

Mail Stop Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

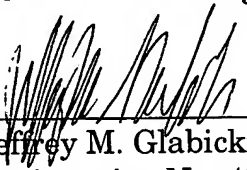
Sir:

Pursuant to 37 C.F.R. ' 1.34, please recognize as associate attorneys or agents in this application the registered attorneys and agents associated with Volpe and Koenig, P.C., Customer No. 24374.

The power to the undersigned appears in the original application papers.

Respectfully submitted,

Donald L. Schilling

By  _____

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